

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL026017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 10/29/2015
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

CAROLINA INN AT VILLAGE GREEN

400 FORSYTHE STREET
FAYETTEVILLE, NC 28303

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This is a Report of a Biennial Construction Survey conducted by Greg Cates and Billy Bryant on October 29, 2015. Based on information gathered from our files, the Facility was first licensed on December 5, 1996 for One Hundred (100) residents. Based on this information, we are requiring the facility to meet the 1996 Rules for the Licensing of Domiciliary Homes and the 1996 North Carolina State Building Code, Section 419- Institutional Occupancy; and the applicable portions of the 2005 Rules for Adult care Home of Seven or More Beds.	C 000		
C 144	Med Prep Area-Sink with Lever Handles SECTION 0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (5) Handwashing facilities with wrist type lever handles shall be provided immediately adjacent to the drug storage area; This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to provide lever handles at the faucet in the Med Rooms. This deficiency may affect all residents who are dispensed medicine from the Med Room by possibly allowing cross contamination. Findings include: a- The sink in the Med Room on the Terrace Level is equipped with knobs for turning on the water.	C 144	Replaced Faucet with lever handle faucet on 10-30-15. Will inspect all faucets to assure all are lever handles. Will conduct in service with maintenance staff on importance of lever handles.	

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

DATE

(X6) DATE

STATE FORM

Nancy A. Peterson, Admin 12.7.15

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If continuation sheet 1 of 7

Division of Health Service Regulation

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C 104	Continued From page 1	C 104		
C 104	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the buildings in good repair and clean. Findings include: a- The door to the Freight Elevator Lobby on the 2nd Floor is missing pieces of trim. b- The corridor carpet outside the Freight Elevator Lobby is stained. c- The vinyl wallcovering in the Terrace Level corridor and public areas is peeling at the seams. d- The vinyl wallcovering in the Terrace Level Living Room is stained at the EXIT door.	C 104		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;	C 166	A) Elevator Lobby Door was repaired and restained on 11-3-15. B) Housekeeping to clean carpet and monitor all building areas to assure cleanliness. Hall carpet cleaned on 12-4-15. C) Terrace level hall, wallpaper is being removed and walls are being painted. Project started 11-2-15. D) Terrace level living room wallpaper is scheduled to be removed and walls painted. Scheduled completion date is 12-15-15. Will conduct monthly inspections of walls and doors.	

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Nancy A. Peterson, Administrator
12-7-15

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C 168	Continued From page 2 (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the building free of hazards by not storing oxygen containers securely to prevent them from falling over or rolling around. This could affect all persons in the facility as the oxygen containers could fall over, damaging the cylinder or nozzle. Findings include: a- There are oxygen bottles being stored in unapproved containers in Resident Room 212. b- There are oxygen bottles being stored in unapproved containers in the 2nd Floor Storage Room. c- There are oxygen bottles being stored in unapproved containers in the 1st Floor Med Room.	C 168	A) Picked up approved storage container for oxygen bottles for Room 212 on 10-29-15. B-C) In serviced staff on appropriate storage of oxygen bottles in storage rooms and med rooms.	
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (a) which shall not apply to existing facilities. This Rule is not met as evidenced by:	C 189		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL028017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 10/29/2015
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C 189	<p>Continued From page 3</p> <p>1- Based on observations, the facility failed to ensure that the building is safe by not maintaining the emergency EXITS. This deficiency directly affects all residents, personnel, and visitors by possibly preventing people from exiting the building in an emergency.</p> <p>Findings on include:</p> <p>a- The EXIT doors from the 1st Floor Dining Room are difficult to open and requires special knowledge by requiring the handle to be pushed up to unlock the doors prior to opening.</p> <p>2- Based on observations, the facility failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affects all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.</p> <p>Findings include:</p> <p>a- The corridor door to the 3rd Floor Freight Elevator Lobby on the rubs against the frame and does not close completely and latch.</p> <p>3- Based on observations, the facility has failed to maintain the building electrical system safe and operating. This deficiency may affect those persons who have access to the electrical room and could allow possible electrocution due to exposure to high voltage wiring.</p> <p>Findings include:</p> <p>a- There is a circuit blank missing in the electrical panel in the Electrical/ Telephone</p>	C 189	<p>Door and Locks inspected by Larry's Locksmith on 12-4-15. Letter attached.</p> <p>A) Adjusted door hinge on 10-30-15. Will continue to inspect all doors on a monthly basis.</p> <p>A) Circuit blanks were repaired on 11-2-15 by Star Electric.</p>	

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Nancy A. Peterson, Administrator
12-7-15

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C 189	<p>Continued From page 4</p> <p>Room.</p> <p>4- Based on observations, the facility has failed to maintain the building electrical system safe and operating due to the GFCI receptacles not tripping. This deficiency may affect staff who utilize the serving kitchen and could cause a person to suffer electrocution.</p> <p>Findings include:</p> <p>a- The GFCI receptacle beside the sink in the 1st Floor Serving Kitchen does not trip when tested.</p> <p>b- The GFCI receptacle beside the sink in the Main Kitchen on the Terrace Level does not trip when tested.</p> <p>5- Based on observations, the facility has failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.</p> <p>Findings include:</p> <p>a- Many of the one-hour rated ceiling tiles in the Sprinkler Riser Room are damaged or missing.</p> <p>6- Based on observations, the facility has failed to maintain the plumbing systems safe and operating by not maintaining an air gap at the ice machine which may allow bacteria to migrate into the ice machine.</p> <p>a- The condensate pipe for the ice machine is extended into the floor drain.</p>	C 189	<p>4 A-B) Star Electric replaced GFIS's on 11-2-15. Check all GFI's to assure proper functioning. Will add GFI's to monthly inspections.</p> <p>5 A) Replaced ceiling tiles on 11-3-15. In serviced staff on proper inspections and fire proofing.</p> <p>6 A) Raise ice machine drain 2" above floor drain on 11-2-15.</p>	

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If continuation sheet 5 of 7

Nancy A. Patterson, Administrator
12-7-15

Division of Health Service Regulation

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C 195	Continued From page 5	C 195		
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1- Based on observations and testing practices, the facility has failed to maintain the hot water temperature between 100 and 116 degrees Fahrenheit. This deficiency could affect all persons who may be in the facility and use the hot water. Findings include: a- The hot water temperature in Resident Room 301 registers 124 degrees Fahrenheit. b- The hot water temperature in Resident Room 121 registers 94 degrees Fahrenheit.	C 195		
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be	C 199	1 A) Adjusted mixing valves on 10-29-15. To assure proper temps will continue to monitor on a daily basis. 1 B) Replaced mixing valve on 11-21-15. Will continue to monitor temps.	

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Nancy A. Peterson, Administrator
12-7-15

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C 199	<p>Continued From page 6</p> <p>provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces:</p> <ul style="list-style-type: none"> (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (a) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1- Based on observations and testing, the facility has failed to maintain the mechanical exhaust systems in working condition. This may affect all persons in the building as it prevents the exhausting of odors and possible bacteria or germs that may cause illness.</p> <p>Findings include:</p> <p>a- The exhaust fan in the bathroom of Resident Room 121 is not working.</p>	C 199	<p>1 A) Replaced exhaust fan in bathroom on 11-2-15. Continue to inspect exhaust fans on monthly basis.</p>	

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Nancy A Peterson, Administrator - 12-7-15

Hot Water Temp Record

Name of Facility: _____

Surveyor: Billy S. Bryant

Date	Reading Location	Temp °F	Print Name	Comments
11-2-15	301	114.2	BCIAN	
11-2-15	301	113.7	BCIAN	
11-2-15	301	114.0	BCIAN	
11-3-15	301	113.2	BCIAN	
11-3-15	301	113.6	BCIAN	
11-3-15	301	114.0	BCIAN	
11-4-15	301	113.6	BCIAN	
11-4-15	301	113.0	BCIAN	
11-4-15	301	112.4	BCIAN	
11-2-15	121	110.2	BCIAN	
11-2-15	121	110.4	BCIAN	
11-2-15	121	110.2	BCIAN	
11-3-15	121	111.4	BCIAN	
11-3-15	121	112.2	BCIAN	
11-3-15	121	112.2	BCIAN	
11-4-15	121	113.0	BCIAN	
11-4-15	121	113.2	BCIAN	
11-4-15	121	112.6	BCIAN	
Signature: 	Print Name: <u>Brian Johnson</u>		Date: <u>11-4-15</u>	

Hot Water Temp - 100 - 116 Deg

Maintain this log of hot water temperatures showing measurements made three times a day for three consecutive days

Return completed log to:

Division of Health Service Regulation
 Construction Section
 2705 Mail Service Center
 Raleigh NC 27699
 Attention: Billy S. Bryant

Fax Number 919-733-6592

Bryan Johnson,

I was at the Village Green's Carolina Inn to inspect the rear egress double doors in the first floor dinning room. These doors are the type that have a three point locking mechanism. To lock this type door from the inside, you must pull the door closed, then lift the lever up to extend the vertical rods; one, located at the top and one at the bottom of the door. This procedure only holds the door in the closed position, but does not actually lock the outside lever to prevent someone from entering. The door can be opened from either side by just pushing down on the lever just like any lever handle lockset. To lock the outside lever, after closing the door, and lifting the lever to extend the vertical rods, you must turn the inside thumbturn counterclockwise which extends the third bolt located at the center edge of the lock into the strike on the secondary door, much like any door lock.

I operated the lock several times to make sure the lock was working well. I could find no problems with the lock at this time.

AA Larry's Locksmith Service
NC Locksmith License # 0137
910-624-5934

12.4.15